UTILITY
PATENT APPLICATION
TRANSMITTAL

42P17058 Attorney Docket No. Grant M. Kloster, et al. First Inventor

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IRANSIVIIIIAL	METHOD OF FORMING A STACKED DEVICE FILLER	· of
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EV325527051US	L
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	15 U.S
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	169-
2. Applicant claims small entity status. See 37 CFR 1.27.	 Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary) 	
Specification (Total Page (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix	a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies	
- Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. ☑ Drawing(s) (35 U.S.C. 113) [Total Sheets 5] 5. Oath or Declaration (signed) [Total Pages 4] a. ☑ Newly executed (original or copy) b. ☐ Copy from a prior application (37 C.F.R. (for continuation/divisional with Box 18) i. ☐ DELETION OF INVENTOR(S) Signed statement attached deleting inventor named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. ☐ Application Data Sheet. See 37 CFR 1.76	Application Amen Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	ded
or in an Application Data Sheet under 37 CFR 1.76:	ate box, and supply the requisite information below and in a preliminary amendmen	it,
	ntinuation-in-part (CIP) of prior application No:	
considered a part of the disclosure of the accompanying continuati relied upon when a portion has been inadvertently omitted from the		
18	. CORRESPONDENCE ADDRESS	
Customer Number or Bar Code Label	or Correspondence address below	
Name		
Address		
City	State Zip Code	
Country	Telephone (503) 684-6200 Fax (503) 684-324	5
Name (Print/Type) Gregory D. Caldwell Signature		}

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Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 1,036.00

Complete if Known									
Application Number									
Filing Date	June 20, 2003								
First Named Inventor	Grant M. Kloster								
Examiner Name									
Group/Art Unit Attorney Docket No.	42P17058								

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)							
Check ☐ Credit card ☐ Money ☐ Other ☐ None	3. ADDITIONAL FEES							
Deposit Account	Large Enti	ty _I S	mali Enti	ty				
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Deposit Account 02-2666	Code (\$) Co	de (\$)	Fee	Description		Fee Paid	
Number Deposit		30 205 50 205					1307	
Account Slakely, Sokoloff, Taylor & Zafman LLP	2053 1	30 205	3 130	Non-English specific	ation			
The Commissioner is authorized to: (check all that apply)	1812 2,5	- 1	_,	•		nation		
Charge fee(s) indicated below Credit any overpayments	1804 9	20 * 180	920	 Requesting publication 	on of SIR prior to			
Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20	1805 1,8	10 180	5 1.840	* Requesting publication	on of SIR after			
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account	1251 1	10 225	51 55		ithin first month		·	
FEE CALCULATION		10 225				1		
1. BASIC FILING FEE		30 225						
Large Entity Small Entity	1254 1,4			Extension for reply w	ithin fourth month	1		
Fee Fee Fee Fee Description Fee Paid	1255 1,9	70 225	55 985	Extension for reply w	ithin fifth month			
Code (\$) Code (\$)		20 240)1 160	Notice of Appeal				
1001 750 2001 375 Utility filing fee 750.00	1402 3	20 240	2 160	Filing a brief in suppo	ort of an appeal			
1002 330 2002 165 Design filing fee 1003 520 2003 260 Plant filing fee	1403 2	80 240	3 140	Request for oral hea	ring			
1004 750 2004 375 Reissue filing fee	1451 1,5	10 245	1,510	Petition to institute a	public use proceed	ding		
1005 160 2005 80 Provisional filing fee	1452 1	10 245	32 - 55	Petition to revive - ur	navoidable			
	1453 1,3	00 245	3 650	Petition to revive - ur	intentional			
SUBTOTAL (1) (\$) 750.00	1501 1,3	00 250)1 650	Utility issue fee (or re	eissue)			
2. EXTRA CLAIM FEES Extra Fee from	1502 4	70 250	235	Design issue fee				
Claims below Fee Paid	1503 6	30 . 250	315	Plant issue fee		4. **		
Total Claims 29 20° = 9 X 18.00 = \$162.00	1460 1:	30 246	30 130	Petitions to the Com	missioner			
Independent 4 3* = 1 x 84.00 = \$84.00	1807	50 180	07 50	Prosessing fee under	37 CFR 1.17(q)			
Multiple Dependent	1806 1	80 180	06 180	Submission of Inform	nation Disclosure S	itml	,	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	8021	40 80:	21 40	Recording each pate property (times numb			40.00	
Code (\$) Code (\$)	1809 7	50 180	9 375	Filing a submission a (37 CFR § 1.129(a))	fter final rejection			
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1810 7	50 28	10 375					
1203 280 2203 140 Multiple Dependent claim, if not paid	1801 7	50 280	11 276		,	°E\		
1204 84 2204 42 **Reissue independent claims over original patent		50 280 00 180				<i>J</i> . (
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	Other fee (sp	"	- 300	of a design application		· · · · · · · · · · · · · · · · · · ·	-	
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SUBTOTAL (2) (\$) 246.00	*Reduced by Ba	sic Filing Fe	e Paid		SUBTOTAL (3)	(\$)	40.00	
SUBMITTED BY	<u></u>					lala (Massilie)	, bla	
	Reass	tration 1	Vo. 1	20.026		lete (if applica		
Name (Print/Type) Gregory D. Caldwell		y/Agent)		39,926	Telephone	(503) 68		
Signature SSEL			·.		Date	06/2	0/03	